

RECEIVED  
CENTRAL FAX CENTER

AUG 29 2005

LAVA GROUP  
UNDERSTANDING PATENT VALUE

## FACSIMILE TRANSMITTAL

MAIL STOP : Amendment

FROM : Gregory S. Smith

EXAMINER : CARDONE, Jason D.

Faxing DATE: August 29, 2005

FACSIMILE : (571) 273-8300

LAVA GROUP FILE #: 13002.1001

SUBJECT: Application Serial No 09/912,220 Filed July 24, 2001

## This Transmission Includes the Following Items

| Item being transmitted                                                 | Pages |
|------------------------------------------------------------------------|-------|
| <input checked="" type="checkbox"/> Transmittal                        | 1     |
| <input checked="" type="checkbox"/> Fee Transmittal with PTO 2038 form | 2     |
| <input checked="" type="checkbox"/> Request for Extension of time      | 2     |
| <input checked="" type="checkbox"/> Response                           | 10    |
| <input type="checkbox"/>                                               |       |
| Total Pages Including Cover Sheet                                      | 16    |

COMMENTS:

TWO RAVINIA DRIVE, SUITE 790  
ATLANTA, GEORGIA 30346TELEPHONE: 770-804-9070  
FACSIMILE: 770-804-0900MOBILE: 404-643-3430  
EMAIL: gsmith@lavagroup.net

RECEIVED  
CENTRAL FAX CENTER

002/016

AUG 29 2005

PTO/SB/21 (09-04)

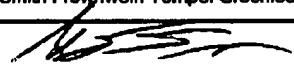
Approved for use through 07/31/2006. OMB 0651-0031


U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

|                                                                                                    |                        |                   |
|----------------------------------------------------------------------------------------------------|------------------------|-------------------|
| <b>TRANSMITTAL<br/>FORM</b><br><br><i>(to be used for all correspondence after initial filing)</i> | Application Number     | 09/912,220        |
|                                                                                                    | Filing Date            | July 24, 2001     |
|                                                                                                    | First Named Inventor   | JUDD, David T.    |
|                                                                                                    | Art Unit               | 2145              |
|                                                                                                    | Examiner Name          | CARDONE, Jason D. |
|                                                                                                    | Attorney Docket Number | 13002.1001        |
| Total Number of Pages in This Submission                                                           |                        | 15                |

| ENCLOSURES (Check all that apply)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input checked="" type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Reply to Missing Parts/<br>Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts<br>under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a<br>Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br><input type="checkbox"/> Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><input type="checkbox"/> Appeal Communication to Board<br>of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC<br>(Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify<br>below):<br>Credit Card Authorization |
| Remarks _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |                                                                                     |          |        |
|--------------------------------------------|-------------------------------------------------------------------------------------|----------|--------|
| Firm Name                                  | Smith Froyhwein Tempel Greenlee Blaha, LLC                                          |          |        |
| Signature                                  |  |          |        |
| Printed name                               | Gregory Scott Smith                                                                 |          |        |
| Date                                       | Aug 29, 2005                                                                        | Reg. No. | 40,819 |

| CERTIFICATE OF TRANSMISSION/MAILING                                                                                                                                                                                                                                                                           |                                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: |                                                                                     |
| Signature                                                                                                                                                                                                                                                                                                     |  |
| Typed or printed name                                                                                                                                                                                                                                                                                         | Gregory Scott Smith                                                                 |
| Date                                                                                                                                                                                                                                                                                                          | Aug 29, 2005                                                                        |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/17 (12-04v2)

Approved for use through 07/31/2008. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**FEE TRANSMITTAL**  
**For FY 2005**☒ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) 225.00**Complete if Known**

|                      |                   |
|----------------------|-------------------|
| Application Number   | 09/912,220        |
| Filing Date          | July 24, 2001     |
| First Named Inventor | JUDD, David T.    |
| Examiner Name        | CARDONE, Jason D. |
| Art Unit             | 2145              |
| Attorney Docket No.  | 13002.1001        |

**METHOD OF PAYMENT** (check all that apply)

☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 50-3479 Deposit Account Name: Smith Frohwein Tempel Gre

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES |                       | SEARCH FEES |                       | EXAMINATION FEES |                       | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
|                  | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)         | Small Entity Fee (\$) |                |
| Utility          | 300         | 150                   | 500         | 250                   | 200              | 100                   |                |
| Design           | 200         | 100                   | 100         | 50                    | 130              | 65                    |                |
| Plant            | 200         | 100                   | 300         | 150                   | 160              | 80                    |                |
| Reissue          | 300         | 150                   | 500         | 250                   | 600              | 300                   |                |
| Provisional      | 200         | 100                   | 0           | 0                     | 0                | 0                     |                |

**2. EXCESS CLAIM FEES**

| Fee Description                                    | Fee (\$) | Small Entity Fee (\$) |
|----------------------------------------------------|----------|-----------------------|
| Each claim over 20 (including Reissues)            | 50       | 25                    |
| Each independent claim over 3 (including Reissues) | 200      | 100                   |
| Multiple dependent claims                          | 360      | 180                   |

| Total Claims                                                           | Extra Claims | Fee (\$) | Fees Paid (\$) | Multiple Dependent Claims | Fee (\$) | Fees Paid (\$) |
|------------------------------------------------------------------------|--------------|----------|----------------|---------------------------|----------|----------------|
| - 20 or HP =                                                           | x            | =        |                |                           |          |                |
| HP = highest number of total claims paid for, if greater than 20.      |              |          |                |                           |          |                |
| Indep. Claims                                                          | Extra Claims | Fee (\$) | Fees Paid (\$) |                           |          |                |
| - 3 or HP =                                                            | x            | =        |                |                           |          |                |
| HP = highest number of independent claims paid for, if greater than 3. |              |          |                |                           |          |                |

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fees Paid (\$) |
|--------------|--------------|--------------------------------------------------|----------|----------------|
| - 100 =      | / 50 =       | (round up to a whole number) x                   | =        |                |

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Two month extension of time

Fees Paid (\$)

225.00

**SUBMITTED BY**

|                   |                                                                                     |                                          |                          |
|-------------------|-------------------------------------------------------------------------------------|------------------------------------------|--------------------------|
| Signature         |  | Registration No. (Attorney/Agent) 40,819 | Telephone (770) 804-9070 |
| Name (Print/Type) | Gregory Scott Smith                                                                 |                                          | Date Aug 29, 2005        |

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.